

UNIVERSITY OF ROCHESTER

BIG MAN CLINIC

FOR CENTERS & FORWARDS
GRADES 9 - 12

August 8-9, 2009

9AM - 4PM

INSTRUCTION TO INCLUDE:

Playing "Big"

Using Body

Footwork

Establishing Post Position

Rebounding

Boxing-Out

Outlet Passing

Offensive Rebounding

Offense

Low Post Moves

High Post Moves

Cutting

Passing

Screening / Using Screens

Defense

Post Defense

Perimeter Defense

Shot-Blocking

Talking / Defending Screens

Help & Recover vs. Penetration

Instruction will be given by UR Head Coach Mike Neer and staff.

Coach Neer was named National Coach of the Year (Division III) in 1990 by the National Association of Basketball Coaches (NABC).

5 UR Big Men have been named to 8 All-American Teams by the NABC.

In the last 28 years at UR:

71 Big Men have shot 50%+ for a season

36 Big Men have averaged 7.0+ rebounds/game for a season

53 Big Men have averaged 10.0+ points/game for a season

UR teams have appeared in 12 NCAA Tournaments:

National Champions – 1990

National Runner-up – 1992, 2005

Final Four – 1990, 1992, 2002, 2005

Elite 8 – 1991

Sweet 16 – 1981, 2003, 2004, 2008

***** BIG MAN CLINIC WILL JOIN GUARD CLINIC FOR
SELECTED DRILLS AND SCRIMMAGES**

Fee: \$170.00 (T-shirt included - camper to bring own lunch)

APPLICATION - 2009 - BIG MAN CLINIC

Name _____ Grade (as of 9/09) ____ Date of Birth _____

Address _____

City _____ State _____ Zip _____

Telephone _____

Email address _____

Ht. _____ Wt. _____ School _____

PARENT'S CONSENT In consideration for allowing my child to participate in the University of Rochester Basketball Camp, I, as his/her parent/guardian, represent and affirm to the University of Rochester that:

* I understand that participating in athletics and other camp activities involves a risk of injury or other harm.

* All such risks are being assumed knowingly and voluntarily including but not limited to those associated with travel to and from the camp activities.

* I will not hold the University, its employees and agents responsible for any injury or other harm that results from participation in the camp, unless the injury or harm is caused intentionally or by gross negligence.

* My child is in good health and has no physical condition that would prevent him/her from participating in this camp.

NAME _____

CAMP TUITION IS \$170

SIGNATURE _____ \$50 due with application / nonrefundable

DATE _____

IN EMERGENCY CALL: _____

Make Check payable to the University of Rochester Boys' Basketball Camp

Michael Neer, Director
University of Rochester Basketball Camp
Goergen Athletic Center
PO Box 270296
Rochester, NY 14627-0296
michael.neer.rochester.edu

For Information call 585-275-4306

4 FINAL FOURS - NCAA DIVISION III – 1990, 1992, 2002, 2005
1990 NATIONAL CHAMPIONS